

D. COUNTY CODES

AN Androscoggin
 AK Aroostook
 CD Cumberland
 FN Franklin
 HK Hancock
 KC Kennebec
 KX Knox
 LN Lincoln
 OD Oxford
 PT Penobscot
 PS Piscataquis
 SC Sagadahoc
 ST Somerset
 WO Waldo
 WN Washington
 YK York
 OS Out-of-State
 OC Out-of-Country

I. PRIMARY SERVICE CODES**SUBSTANCE ABUSE/AFFECTED CLIENTS****DETOXIFICATION**

01 HOSPITAL INPATIENT
 02 FREE STANDING INPATIENT
 42 METHADONE DETOXIFICATION

LIFE MAINTENANCE

14 SHELTER

CLIENTS WITH COEXISTING MENTAL ILLNESS**DETOXIFICATION**

21 HOSPITAL INPATIENT
 22 FREE STANDING INPATIENT

LIFE MAINTENANCE

37 SHELTER

1. PRIMARY REFERRAL SOURCE RESPONSIBLE FOR CLIENT BEING HERE

01 SELF
 02 FAMILY MEMBER
 03 EMPLOYER
 04 SUBSTANCE ABUSE PROFESSIONAL (PRIVATE PRACTICE)
 05 SUBSTANCE ABUSE AGENCY
 06 PHYSICIAN (NON-SUBSTANCE ABUSE SPECIALIST)
 07 OTHER PROFESSIONAL (NON-SUBSTANCE ABUSE SPECIALIST)
 08 DEEP (DRIVER EDUCATION AND EVALUATION PROGRAM)
 09 ADULT PROTECTIVE SERVICES - DHS
 10 CHILD PROTECTIVE SERVICES - DHS
 11 SUBSTITUTE CARE SERVICES - DHS
 12 PROBATION/PAROLE STATE OF MAINE
 13 CORRECTIONAL FACILITY MAINE
 14 COUNTY JAILS
 15 AUGUSTA/BANGOR MENTAL HEALTH INSTITUTE
 16 MENTAL HEALTH AGENCY
 17 FRIEND
 18 EAP
 19 SAP
 20 STATE/FEDERAL COURT
 21 FORMAL ADJUDICATION PROCESS
 22 SELF-HELP GROUP
 23 HOSPITAL
 24 SCHOOL
 25 AIDS OUTREACH WORKER
 99 OTHER

16-18. SUBSTANCE CODES

00 NOT APPLICABLE (CANNOT BE USED ON #16)
 01 ALCOHOL
 02 MARIJUANA, HASHISH, THC
 03 COCAINE, CRACK
 04 HEROIN
 05 NON-RX METHADONE
 06 OTHER OPIATES AND SYNTHETICS
 07 PCP
 08 OTHER HALLUCINOGENS
 LSD, DMS, STP, ETC.
 09 METHAMPHETAMINES
 10 OTHER AMPHETAMINES
 11 OTHER STIMULANTS
 12 BENZODIAZEPHINES
 13 OTHER TRANQUILIZERS
 14 BARBITURATES
 15 OTHER SEDATIVES OR HYPNOTICS
 16 INHALANTS
 17 OVER-THE-COUNTER
 18 OTHER

20-22. FREQUENCY OF USE

00 NONE (CANNOT BE USED ON #20)
 02 NO USE PAST MONTH
 03 ONCE IN THE LAST 30 DAYS
 04 2-3 DAYS PER MONTH
 05 ONCE PER WEEK
 06 2-3 DAYS PER WEEK
 07 4-6 DAYS PER WEEK
 08 DAILY

23. TOBACCO PRODUCTS ONLY

(FOR USE WITH #23 ONLY)

00 NONE
 10 ABOUT HALF A PACK/CAN/POUCH A DAY OR LESS
 11 ABOUT A PACK/CAN/POUCH A DAY
 12 ABOUT A ONE AND A HALF PACKS/CANS/POUCHES A DAY
 13 ABOUT 2 PACKS/CANS/POUCHES A DAY
 14 MORE THAN 2 PACKS/CANS/POUCHES A DAY

24-27. ROUTE OF ADMINISTRATION

00 NOT APPLICABLE (CANNOT BE USED ON #24)
 01 ORAL
 02 SMOKING
 03 INHALATION
 04 INJECTION
 05 OTHER

44. STATUS AT DISCHARGE

01 CLIENT TERMINATION WITHOUT CLINIC AGREEMENT (I.E., CLIENT LEAVES WITHOUT EXPLANATION)
 02 TREATMENT IS COMPLETE
 03 FURTHER TREATMENT IS NOT APPROPRIATE FOR CLIENT AT THIS FACILITY
 04 NON-COMPLIANCE WITH RULES AND REGULATIONS
 05 CLIENT REFUSED SERVICE/TREATMENT
 30 CLIENT LEFT TREATMENT DUE TO LACK OF CHILDCARE
 07 CLIENT DISCHARGED FOR MEDICAL AND/OR PSYCHOLOGICAL TX.
 11 CLIENT INCARCERATED
 12 CLIENT DECEASED
 99 SHELTER CLIENTS ONLY

46-48. EXPECTED SOURCES OF PAYMENT

00 NONE (CANNOT BE USED ON #46 PRIMARY)
 01 OSA
 02 HUMAN SERVICES (OTHER THAN CHILD, ADULT PROTECTIVE)
 03 CORRECTIONS
 04 HUMAN SERVICES (CHILD, ADULT PROTECTIVE)
 05 SELF-PAY
 06 MEDICAID
 07 MEDICARE
 08 BLUE CROSS/BLUE SHIELD
 09 HEALTH MAINTENANCE ORGANIZATION (HMO)
 10 OTHER PRIVATE HEALTH INSURANCE
 11 TOWN ASSISTANCE
 12 WORKERS' COMPENSATION
 13 VETERAN'S ADMINISTRATION
 14 OTHER

49. UNITS OF SERVICE CODES**DETOXIFICATION**

01 HOSPITAL
 02 FREE STANDING INPATIENT
 42 METHADONE DETOXIFICATION

LIFE MAINTENANCE

14 SHELTER